FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

ELEVATION CERTIFICATE

O.M.B. No. 3067-0077 Expires December 31, 2005

Important: Read the instructions on pages 1 - 7.

		SECTION A -	PROPERTY OWNER INFORM	MATION	For Insurance Company Use:	
BUILDING OWNER'S N	Policy Number					
Dana M. & Glen E. I		Ant Unit Suite and/or B	ldg. No.) OR P.O. ROUTE AND	BOY NO	Company NAIC Number	
226 Bristol Hammock Co	urt	The one core and o		BOX NO.	Company NAIC Number	
CITY Kingsland			STATE	ZIP C		
	ION (Lot and Block	Numbers, Tax Parcel No	Ga umber, Legal Description, etc.)	31548	3	
Lot 42. Bristol Hammock,	Phase 2					
BUILDING USE (e.g., Re Residential	sidential, Non-resid	dential, Addition, Accesso	ry, etc. Use a Comments area,	if necessary.)		
LATITUDE/LONGITUDE		HORIZON	TAL DATUM:	SOURCE: GPS (T)	we).	
(##°-##-##.##" or ##	£.######°)	☐ NAD 1927	☐ NAD 1983	USGS C	Quad Map	
	······································	SECTION B - FLOOD IN	SURANCE RATE MAP (FIRM	INFORMATION		
B1. NFIP COMMUNITY NAME				·		
130262	O COMMODIALL MOIN		. COUNTY NAME mden		B3. STATE Ga	
B4. MAP AND PANEL		<u></u> <u></u>	B7. FIRM PANEL			
NUMBER	B5. SUFFIX	B6. FIRM INDEX DATE	EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S)	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding)	
13039C0360	С	09-30-88	09-30-88	AE	11'	
B10. Indicate the source of the						
☐ FIS Profile B11. Indicate the elevation date	☑ FIRM	Community Determ				
B12. Is the building located in a	um useu ior ine orio Roastal Ramor Ros	:011mae Svetom (CBDS) ara	NAVD 198			
	SEC	CTION C - BUILDING FL	EVATION INCORMATION (C)	IPVEN BEOLIBED	Designation Date	
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED) C1. Building elevations are based on: Construction Drawings* C3. Building Under Construction* C4. Building Under Construction* C5. Building Under Construction*						
		en construction of the building	on is complete	Finished Construction		
J2. Building Diagram Number	1 (Select the building	diagram most similar to the	building for which this certificate is t	noina completed - coo nocoo	a 6 and 7. If no diagrams	
accurately represents the t	ouilding, provide a sk	etch or photograph.)	pounds ig for an ion a tip oci micole is t	only completed - see pages	io and 7. Inno diagram	
accurately represents the building, provide a sketch or photograph.) C3. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO						
Complete Items C3a-i be	low according to the	building diagram specified in	ltem C2. State the datum used lf t	he datum is different from the	e datum used for the PEE in	
Section B, convert the datu	um to that used for th	e BFE. Show field measurer	ments and datum conversion calcul	ation. Use the snace omvid	ed of the Comments area of	
Section Dior Section G, as	appropriate, to docu	ment the datum conversion.		or and opened provide	20 the Continuity area of	
Datum 1929 Conversion/					*******	
Elevation reference mark u	ised <u>see commen</u> D	oes the elevation reference i	mark used appear on the FIRM? []Yes⊠No [GEORG/A	
a) Top of bottom floor (ii)	ncluding basement c	r endosure)	<u>12</u> . <u>0</u> ft.(m)		OISTEA	
☐ b) Top of next higher flo			22.2ft.(m)	as a	A CHECK TO SEE	
c) Bottom of lowest hori		nber (V zones only)	<u>N/A</u> ft.(m)	mbossed Seal		
d) Attached garage (top			<u>10</u> . <u>7</u> ft.(m)	£ 3	No. 2893	
□ e) Lowest elevation of n			•	ii a t	inte Bunton	
servicing the building		ments area)	- <u>N/A</u> ft.(m)	a g	81-21-05-0	
f) Lowest adjacent (finisi			<u>9.0</u> ft(m)	S. S.	SURV	
☐ g) Highest adjacent (finis			<u>10</u> . <u>0</u> ft.(m)	ensk	ALL DELINE	
C) i) Total ama of all name	enings (Rood vents) v	vithin 1 ft. above adjacent gn	ade <u>0</u> ***	<u> </u>	AF BEI	
U i i Total alea or ali perma		I vents) in C3.h <u>N/A</u> sq. in. (s	<u> </u>			
This configuration is to be significant.	OEI	JIOND-SURVEYOR,	ENGINEER, OR ARCHITECT	CERTIFICATION .		
I certify that the information	yneu anu sealeu b Lin Sections A. B.	y a iano surveyor, engine	er, or architect authorized by lar epresents my best efforts to inte	w to certify elevation infor	mation.	
I understand that any false	statement mav be	punishable by fine or im	prisonment under 18 U.S. Code,	erpret the data available. Section 1001		
CERTIFIER'S NAME Emest	R. Bennett, Jr.	position do by mile of mily	moniment under 10 0.3. Code,	LICENSE NUMBER 28	93	
					·• .	
TITLE Registered Land Survi	eyor		COMPANY NAME	Privett - Bennett & Associate	≽s, Inc.	
DDRESS	<u></u>	· · · · · · · · · · · · · · · · · · ·	CITY	STATE	ZIP CODE	
1201 Shadowlawn Drive			St. Marys	GA	31558	
SIGNATURE	4	. 1	DATE	TELEPH		
t=+t	Bum	- H.	02-21-05	040.000		
		(2/				
						

Y			For Incumpos Company I see
MPORTANT: In these space	s, copy the corresponding information from Sect	tion A.	For Insurance Company Use: Policy Number
UILDING STREET ADDRESS (Includ	ling Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX	NU.	Fostoy Number
26 Bristol Hammcok Court	STATE Ga	ZIP CODE 31548	Company NAIC Number
ngsland	SECTION D - SURVEYOR, ENGINEER, OR ARC		INUED)
<u> </u>	ertificate for (1) community official, (2) insurance agent/comp	Daily, and (of building owner.	
OMMENTS oference Renchmark Railroad Sni	ike In E'LY Side Of 10" Oak Tree Located On Lot 39 Along	R/W Of Bristol Hammock Court	
lev. 11.00' (NGV 29 Datum).	inclination of the dather persons of the second		
o Apparent Machinery Servicing D	Owelling At The Time Of Survey.		
B 205-B PG 75			Check here if attachmen
SECTION E - BUIL	DING ELEVATION INFORMATION (SURVEY NO	T REQUIRED) FOR ZONE AO AN	D ZONE A (WITHOUT BFE)
Zone AO and Zone A (without BF	E), complete Items E1 through E4. If the Elevation Certific	ate is intended for use as supporting info	ormation for a LOMA or LOMR-F,
tion C must be completed.			
Building Diagram Number _(Sek represents the building, provide a	ect the building diagram most similar to the building for whic a sketch or photograph.)	h this certificate is being completed – se	e pages 6 and 7. It no diagram accurately
	ting basement or enclosure) of the building isft.(m)_	_in.(cm) 🔲 above or 🔲 below (chec	ok one) the highest adjacent grade. (Use
. For Building Diagrams 6-8 with o grade. Complete items C3.h and	penings (see page 7), the next higher floor or elevated floor d C3 i.co. front of form	(elevation b) of the building isft.(m)	in.(cm) above the highest adjacent
. The top of the platform of machin	nery and/or equipment servicing the building isft.(m)_	_in.(cm) 🔲 above or 🔲 below (cheo	ck one) the highest adjacent grade. (Use
natural grade, if available).	pth number is available, is the top of the bottom floor elevate	ed in accordance with the community's f	loodplain management ordinance?
. For Zone AO Only. In lo hood de Inknow. ☐ Yes ☐ No. ☐ Unknow.	n. The local official must certify this information in Section 0	3.	
	SECTION F - PROPERTY OWNER (OR OWNER	R'S REPRESENTATIVE) CERTIFI	CATION
The amount owner or owner's suith	horized representative who completes Sections A, B, C (Iter		
issued BFE) or Zone AO must sign	here. The statements in Sections A, B, C, and E are corre	ect to the best of my knowledge.	
	NER'S AUTHORIZED REPRESENTATIVE'S NAME		
		CITY	STATE ZIP CODE
ADDRESS		CIT	STATE ZIF CODE
SIGNATURE		DATE	TELEPHONE
COMMENTS			And the second
			Check here if attachmen
	SECTION G - COMMUNITY INF	ORMATION (OPTIONAL)	
a local official who is authorized b	y law or ordinance to administer the community's floodplain		Sections A. B. C.(or F.), and G.of this Elevation
ertificate. Complete the applicable	-	The legation delication out to the out	
a unicate. Complete the applicable	C was taken from other documentation that has been signed	and embossed by a licensed surveyor.	engineer, or architect who is authorized by s
or local law to certify elevati	ion information. (Indicate the source and date of the elevation	on data in the Comments area below.)	
2. A community official comple	eted Section E for a building located in Zone A (without a FE	MA-issued or community-issued BFE)	or Zone AO.
	ems G4-G9) is provided for community floodplain managen		
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		OF COMPLIANCE/OCCUPANCY ISSUED
34. FERIARI INDIAIDEN	GO. DATE PERSON I GOODS	30. 5.12.32.11. 13.172	<u> </u>
7. This permit has been issued for	: ☐ New Construction ☐ Substantial Improvement		
•	(including basement) of the building is:	ft.(m)	Datum:
9, BFE or (in Zone AO) depth of flo	·	ft.(m	n) Datum:
LOCAL OFFICIAL'S NAME		TITLE	·
COMMUNITY NAME		TELEPHONE	
SIGNATURE		DATE	
COMMENTS			
		<u>.</u>	
			Check here if attachme